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Application Number	10/004,623
Filing Date	12/03/2001
First Named Inventor	BURFEIND, Craig et al.
Art Unit	2862
Examiner Name	
Attorney Docket Number	702.500-CNT1

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

68247

Please change the correspondence address for the above-identified application to:

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Customer Number:

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature /Andrew R. Etkind/

Name Andrew R. Etkind

Date 02/03/2007

Telephone 913-397-8200

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

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